

APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE DEPARTMENT OF ARCHIVES AND HISTORY RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 76—RM—1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

FOR AGENCY USE	1. Agency Address	FOR RECORDS MANAGEMENT USE
Application Dete	Georgia Department of Human Resources	Application Number
May 25, 1977	Assistant Commissioner for Aging and	77-168
Application Number	Special Councils - Office of Aging	Date Received Date Completed
DHR-148	618 Ponce de Leon Avenue, N. E. Atlanta, Georgia 30306	MAY 25 1977 JUL - 6 1977
2. Person to Contact	Working Title	Telephone Number
Miss Susan Daugherty	y Coordinator	894-5333 🛰
3. Action Requested		
•	Schedule; record will continue to accumulate.	
***	ecumulation; no further accumulation anticipated.	
c. Amend Application I		de; □ Void
4. Detes of Series Earliest Latest	5. Records Series Title (followed by title used in office; if dil	
1965 to present		<u>a de la casa de la ca</u>
8. Division and Office Function	What is the function of the Division and the Office in	which this record series is created?
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Assistant Commissioner ros Health Council on Family	r Aging and Special Councils supervises the Office of A Planning, Council on Developmental Disabilities, Appal	iging, Council on Haternal and insant is included the second of the seco
Office, and State Office of		
Office of Aging has the re	esponsibility to work toward the prevention of prematur	ra institutionalization of older
Georgians and allow older	individuals to maintain independence in their own home	es to the maximum extent possible;
	life of older Georgians through the development of a cavailable to older Georgians (particularly those who a	
low incomes) nutritionally	y sound meals in strategically located centers where th	hey can also receive social services
such as outreach, informat	tion and referral, counseling, transportation, nutritio	on education and social activities.
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en e		
7. Record Series Description	This file contains the following documents (include form numerical samples of the file.	imbers and titles, if any):
Documents relating to: adm	inistering the program, State-wide, to impr	•
older people.		
	s III and VII as appropriate Plan (appli	
	standard provisions and assurances, organ	
	acteristics of theplanning and service area	
	rant Award (approval of the application); various sources when pertinent).	reports; and technical
assistance (from	various sources when pertinent,	
	in the second se	.
± 1		
File is arranged: by Title	; thereunder, alphabetically by area; the	ereunder, alphabetically by
subject matter.		
8. Monthly Reference Rate	How often are records referred to which are:	3
One to six months old da1	ly; Seven to twelve months old daily; Thirteen to	twenty-four months old month ly
twenty-five monthstwic	e older rarely	
9. Annual Rate of Accumulation		
Letter-size drawers9	and the second of the second o	Other (specify)
		(1) (1)

YES	NO 10. Questionna	ire (Place an "	'X" in the proper col	uma)		
		official copy of th				\p'
X	If not, whe					
	b. Does the se	ries contain confi	idential information	requiring security handlin	g? If yes, cite law or regu	lation.
	x c. Is this a vit	al record?	4		·	
x			al or long term resear	ch value?		
	e. When one o	or two documents	s in the file make it n	ecessary to keep the entir	e file for a long period, co	uid these
		be scheduled sep				·
				blished? If yes, attach o		
- 1	g. is the infor 또 설탕 ves. attac	mation contained th cook	in this series ever an	alyzed and/or recorded in	a summarized report? 7	T:= , 7
		uplication of this	series in your office,	or in another office or a	ency?	
				icrofilmed?		
i			in a computer printo			- 41
11. P	Retention Requirement	ts T	he following requires	the series to be kept:		
	. State Lew			d. Audit period		
_	 Statute of limitation 		years.	Administrative		years.
	. Federal law		years.	f. Federal retent		
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. 🛕	Attach copy or excert o	of laws or regulati	ions. Explain admini	strative need.		
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	Approved Disposition I					
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